, **.** . . . .

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

\* If the entry in column 1 is loss than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

\*\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

OR

OR

+130=

ADDIT, FEE

TOTAL

+260=

ADDIT, FEE

TOTAL

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